

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY **BREATH ALCOHOL PROGRAM** DATAMASTER MAINTENANCE REPORT

By Carol Day at 8:43 am, Apr 16, 2014

REPORT #8

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days). Complete this report whenever the instrument is serviced or repaired and whenever it is placed into service.																
Re	etain th	ne origir	nal and	send	асору	within	in is serv 15 days to	the Brea	th Alco	hol Prog	ram, DHS	S.	into serv	nce.		
DATAMASTER SN NAME OF AGE								DATE OF INSPECTION			ON /	1				
	950079 COU				INTRY CLUB HILLS POLI				E		04/07/2014			•		
LOC	LOCATION OF INSTRUMENT (STREET AND CITY)										TIME OF INSPECTION					
	7422 EUNICE AVE. COUNTRY CLUB HILLS, M								LS, MO	O 6313	6	1		0140	HRS	
CHECKLIST. Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.																
X	DIAGNOSTIC CHECK (PRINTOUT ATTACHED)							DATE AND TIME (from printout) 04/07/14 0140 HRS								
	⊠c	OMP.UTER							DETECTOR							
	⊠ F	PROGR.	AM							⊠ FIL	TERS					
	×	EATER	RS SAM	IPLE (СНАМВ	ER	49	c		QU.	ARTZ STA	NDARE)	•		
	ØF	FLOWDETECTOR							CALIBRATION							
	⊠ p	PUMP H	IGH SF	PEED						⊠ PR	NTER					
Ø	INDI	CATOR	LIGHT	s												
Ø	SIML	JLATOF	SOLU	TION	SUPPL	IER _		GUTH L	ABS		_ LOT #_	13	3210	EXP.DA	TE	07/29/2015
\boxtimes	SIMU	JLATOF	R TEMP) (34-0	C ± 0.2'	C)	34		C SIMI	ULATO	R SN	DR 1	381	_ EXP.DA	TE	07/10/2014
\boxtimes	CALIE	BRATIC	N CHE	CK - (ONLY	ONE S	TANDAR	D IS TO I	BE USE	ED PER	MAINTEN	IANCE	REPORT	Γ)		
		CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT) Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Mark the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)														
	K-7	0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE														
	1 0.	100% S 080% S	TANDA	RD -	MUST	READ	BEIVVEE! RETMEE!	N 0.095% N 0 076%	AND U	1.105% I 1.084% I	NCLUSIVE	=				
0.080% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE																
TE	ST			.102			TEST			.102		TES	T 3		.10	12
				*						.102					.10) <u>Z</u>
							(ACI-ED)									
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT. (DO NOT INCLUDE SELF-ADMINISTERED TESTS)																
REF	FUSAL	LS 0	(0	04)	0		(.0509)	0	(.	1014)	0	(.1	519)	0	OVE	R.19 ₀
LIST	ANY NEV	V PARTS A	ND DESCR	RIBE AN'	Y ALTERAT	ION OR	ODIFICATION	THAT WAS	MADE TO	RESTORE	THE INSTRUME	ENT TO OF	PERATE SAT	SFACTORILY A	ND WITH	IN ESTABLISHED LIMITS
(USE OTHER SIDE IF NECESSARY).																
																-
zestaser:		245,855 pl \$55,855.656								Angeles de la company		contrata establica de la contrata d			was processed	
INSPECTING OFFICER SIGNATURE PRINT FUEL NAME																
567 SDENCE W350								SGT. GARY L. SPENCER DSN 357								
TYPE II PERMIT NUMBER/EXPIRATION DATE								-	TELEPHONE NUMBER							
220080 03/23/2014								314-261-0845								
RETURN COMPLETED REPORT TO THE Good Program, MO Department of Health and Senior Services, Southeast District Office																
28° ó lemes Blvd. Filper Bluff, MO 63901																
	ר . יייטפט ל און איינען															



CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator

Random Samples of Lot Number 13210 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on July 31, 2013, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1216% (w/vol) ethyl alcohol. The expiration date for this lot number is July 29, 2015 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

The alcohol and water used in this solution were free of test interfering substances.

Ted L. Pauley, President GUTH LABORATORIES, INC.

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster

Evidence Ticket

STATE OF MISSOURI COUNTRY CLUB HILLS POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 950079 04/07/14 01:40

--- DIAGNOSTIC CHECK ---

COMPUTER:

OKAY

PROGRAM (04-07-2009):

OKAY

HEATERS

SAMPLE CHAMBER:

49c

FLOW DETECTOR:

OKAY

PUMP

HIGH SPEED:

QKAY

· DETECTOR:

OKAY

FILTERS:

OKAY

QUARTZ STANDARD:

OKAY

CALIBRATION:

OKAY

PRINTER TEST

!"#\$%%'()*+,-./0123456789:;<=>?eABCDEFG HIJKLMMOPQRSTUVWXYZ[\]^_'abcdefahijklmno parstuvwxaz(|)++

OPERATOR SIGNATURE SGT SPENCEN 367

CARD STK # 60036

REORDER ALL SUPPLIES FROM N.P.A.S.

2260 NORTH MAIN, MANSFIELD, OH 44903 419-526-6727 (NPAS)

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster

Evidence Ticket

STATE OF MISSOURI COUNTRY CLUB HILLS POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 950079 04/07/14

TESTING OFFICER:
SPENCER/GARY/L
OFFICER I.D.: 357
PERMIT NUMBER: 220080
EXPIRATION DATE: 03/23/14
MISCELLANEOUS DATA:
PERMIT RENEWAL

--- SUPERVISOR MODE ---

BLANK TEST	. พิชิษิ	61:44
INTERNAL STAMDARD	VERIFIED	01:44
EXTERNAL STAMDARD	. 102	01:44
BLANK TEST	. ହୁଞ୍ଜ	01:45
EXTERNAL STAMDARD	.102	01:45
BLANK TEST	.999	01:46
EXTERNAL STANDARD	.102	91:46
BLANK TEST	. 998	01:47

N = 3 SIM. = .1 AVG. = .102

OPERATOR SIGNATURE SGT SPERVED 757

CARD STK #

REORDER ALL SUPPLIES FROM N.P.A.S.

60036

2260 NORTH MAIN, MANSFIELD, OH 44903 419-526-6727 (NPAS)

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster

Evidence Ticket

STATE OF MISSOURI COUNTRY CLUB HILLS POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 950079 04/07/14

ARREST TIME: 01:30
SUBJECT NAME:
RFI/TEST
DOB: 05/26/51 SEX: M
STATE/D.L.: MO/123456789
ARRESTING OFFICER:
SPENCER/GARY/L
OFFICER I.D.: 357
TESTING OFFICER:
SPENCER/GARY/L
OFFICER I.D.: 357
PERMIT NUMBER: 220080
EXPIRATION DATE: 03/23/14
MISCELLANEOUS DATA:

--- BREATH AMALYSIS ---

BLANK TEST
INTERNAL STANDARD
RADIO INTERFERENCE

.000 01:52 VERIFIED 01:52

OPERATOR SIGNATURE SOT SPENCEN367

CARD STK # 60036

REORDER ALL SUPPLIES FROM N.P.A.S. 2260 NORTH MAIN, MANSFIELD, OH 44903 419-526-6727 (NPAS)

DEPARTMENT OF HEALTH State of Missouri



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GARY L SPENCER

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field repairs, and operate the following breath analyzer(s):

DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired (alveolar) air. Issued under the provisions of sections 577.020 through 577.041, RSMo 1986.

03/23/2012

Date _

Number 220080

Expires 03/23/2014

MO 580-0771 (7-88)

Director of State Public Health Laboratory

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Director, Department of Health

Lab. 4 (R7-88)